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pplication or Docket Number

PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2000

09/841430

-	CLA	CA CMI	(Column		(Colum	nn 2)		SMALL EN TYPE		OR	OTHER THAN			
TOTAL CLAIMS			514	9			֓֞֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓	RATE	FEE		RATE	FEE		
FO	R		NUMBER F	ILED	NUMBE	R EXTRA	Tarible !	BASIC FEE	355.00	ÖŘ	BASIC FEE	710.00		
TOTAL CHARGEABLE CLAIMS			5/49min	us 20=	. 51	29		X\$ 9=	10-24	OR	X\$18=	92322		
IND	EPENDENT CLAIMS		164 mir				1	X40=		1467	*X80=	12880		
	LTIPLE DEPENDENT							V-40-		OR	1007.J	12000		
					+135=		OR	+270=	A CO					
• If	the difference in colu	ımn 1 is le	ess than ze		TOTAL	Carrier Societies	OR	TOTAL	105912					
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S			Minus	** 0	2	=170>		X\$ 9=		OR	%\$18=	ROSS		
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	PROTPRESERVAN	JIT OF INO	Lin LL DLi	LINDLIN	, , , , , , , , , , , , , , , , , , , ,		•	+135=	ा कंक्स्य ११ स्टब्स्ट्र	OR	+270=			
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	· (Col	lumn 1)	•		ADDIT. FEE		•	α / Δ	agen#					
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E	Independent •		Minus		M	-	#-		•	OR				
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·				. ,			, i	+135=		OR.	+270=			
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	(Co	lumn 1)		(Colu	ımn 2)	(Column 3		ADDIT. FEE			ADDIT: I EL			
	С	LAIMS		HIG	HEST MBER		۱ 🗅		ADDI-		<u> </u>	ADDI		
E	A	MAINING AFTER		PREV	IOUSLY FOR	PRESENT EXTRA		RATE	TIONAL		RATE	TIONAL FEE		
MA.		NDMENT	Minus	1/	/	=2	1	V0.0	FEE	•	V040	7/		
AMENDMENT C	Ind p ndent •	<u> </u>	Minus	-700 \$	<u> </u>	= (1	X\$ 9=		OR	X\$18=	 /		
₹	FIRST PRESENTATI	ON OF MU		PENDEN	T CLAIM		1	X40=		OR	X80=	! /		
	<u> </u>						•	+135=		OR	+270=	X		
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	"If th "Highest Number P The "Highest Numb r Pr	Prviusly Pa	aid For" IN TH	IS SPACE	E is less tha	an 3, enter " 3.'			propriate bo		*			
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OTAL	CLAIMS		(Column 1)		Oolar		ſ	RA	TE	FEE		RA	TE	FEE
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OR			NUMBER FILE	+			ı		-		OR		18=	
TOTAL CHARGEABLE CLAIMS INDEPENDENT CLAIMS			minus 20= minus 3 =		*				9=			X84=		
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	difference in	- ali men 1 io lo	es than zero	enter	"0" in colu	ımn 2		TC	TAL		OR	то	TAL	
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		Column 1) CLAIMS REMAINING AFTER		(Colur HIGH NUM PREVIO	EST BER DUSLY	PRESENT EXTRA		Г		ADDI- TIONAL FEE		R	ATE	ADDI- TIONAI FEE
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1T B		CLAIMS REMAINING AFTER		NU! PREV	HEST MBER YIOUSLY D FOR	PRESENT EXTRA			RATE	ADDI- TIONA FEE			RATE	TION/ FEE
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	FIRST PRESE	ENTATION OF	MULTIPLE DE	EFEND				1	+140=	.	c	DR	+280=	=
1	* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. * If the entry in column 1 is less than the entry in column 2, write "0" in column 3. * If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."									TOTAL OR TOTAL ADDIT. FEE				